

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American Health Care Association Political Action Committee

ADDRESS (number and street)

1201 L Street, NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00006080

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Leonard Russ

Signature of Treasurer

Mr. Leonard Russ

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 05 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y 05 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		287615.28
(b) Cash on Hand at Beginning of Reporting Period.....	475915.41	
(c) Total Receipts (from Line 19)	69194.05	527361.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	545109.46	814976.62
7. Total Disbursements (from Line 31)	67209.81	337076.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	477899.65	477899.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	1		2	0	1	3		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	3		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	62438.70	491635.70
(ii) Unitemized	1755.35	17588.26
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	64194.05	509223.96
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	64194.05	519223.96
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1931.13
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1206.25
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	69194.05	527361.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	69194.05	527361.34

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1826.82	8737.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1826.82	8737.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65382.99	322132.99
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	6206.25
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	67209.81	337076.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67209.81	337076.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	64194.05	519223.96
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64194.05	519223.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1826.82	8737.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1931.13
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	1826.82	6806.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stacie Aman

Mailing Address 700 13th Street, NW
Second Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Golden Living

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 31 / 2013

Transaction ID : C2339824

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Harry Baum

Mailing Address 10315 Johnson Drive

City Shawnee State KS Zip Code 66203

FEC ID number of contributing federal political committee.

C

Name of Employer

Sharon Lane Health Services

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 28 / 2013

Transaction ID : C2337789

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

C. Bailey Beeken

Mailing Address 3777 Independence Ave, Apt 10H

City Riverdale State NY Zip Code 10463

FEC ID number of contributing federal political committee.

C

Name of Employer

Lincoln Healthcare Events

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 16 / 2013

Transaction ID : C2331496

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brad Bilbo

Mailing Address 527 Charlotte Lane

City State Zip Code
 Bremen GA 30110

FEC ID number of contributing federal political committee.

C

Name of Employer

Cypress Health Group

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 01 / 2013

Transaction ID : C2351469

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Scott Brown

Mailing Address 269 Gilman Street

City State Zip Code
 Bridgeport CT 06605

FEC ID number of contributing federal political committee.

C

Name of Employer

Lincoln Healthcare Events

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 16 / 2013

Transaction ID : C2331494

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Elizabeth Casey

Mailing Address 3075 E Thousand Oaks Blvd

City State Zip Code
 Westlake Village CA 91362-3402

FEC ID number of contributing federal political committee.

C

Name of Employer

The Chase Group

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 22 / 2013

Transaction ID : C2337387

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)..... ►

6375.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Phil Chase

Mailing Address 3075 E Thousand Oaks Blvd

City State Zip Code
 Thousand Oaks CA 91362-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Chase Group

Occupation

Nursing Home Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 30 / 2013

Transaction ID : C2339789

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Susan Chase

Mailing Address 5374 Long Shadow Ct

City State Zip Code
 Westlake Village CA 91362-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Chase Group

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2013

Transaction ID : C2337390

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Terry Cook

Mailing Address 124 Walter Barrett Road

City State Zip Code
 McRae GA 31055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pine Leaf Investments

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 22 / 2013

Transaction ID : C2337372

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lori Cooper

Mailing Address 1891 Andrews Drive

City State Zip Code
 Concord CA 94521

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Stonebrook Healthcare Center

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 08 / 2013

Transaction ID : C2326005

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Helen Crunk

Mailing Address 1208 N 14th Street

City State Zip Code
 Nebraska City NE 68410

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mable Rose Estates

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 22 / 2013

Transaction ID : C2336691

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. Joseph DeMattos

Mailing Address 18 Chasemount Ct

City State Zip Code
 Baltimore MD 21209

FEC ID number of contributing
federal political committee.

C

Name of Employer
 HFAM

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 02 / 2013

Transaction ID : C2322523

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

975.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Barbara J. Duffy

Mailing Address 2308 Walnut Ave SW

City
Seattle

State Zip Code
WA 98116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lane Powell PC

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 09 / 2013

Transaction ID : C2327523

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John Elliot

Mailing Address 240 Capitol Street
Suite 500

City
Charleston

State Zip Code
WV 25301-2297

FEC ID number of contributing
federal political committee.

C

Name of Employer

Amer. Medical Facilities Management, I

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2350612

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. John Elliot

Mailing Address 240 Capitol Street
Suite 500

City
Charleston

State Zip Code
WV 25301-2297

FEC ID number of contributing
federal political committee.

C

Name of Employer

Amer. Medical Facilities Management, I

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2350613

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joanne E Erickson

Mailing Address 911 S Randolph St

City

Arlington

State

VA

Zip Code

22204-1564

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Health Care Association

Occupation

Editor in Chief, Provider Magazine

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.72

Date of Receipt

05 / 30 / 2013

Transaction ID : C2341137

Amount of Each Receipt this Period

95.24

* Payroll Deduction: \$47.62 Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Kenneth Evans

Mailing Address 2220 E Ryan Ave

City

Fresno

State

CA

Zip Code

93720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Country Villa Health

Occupation

Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 10 / 2013

Transaction ID : C2327872

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Stephen Flood

Mailing Address 2608 Harvest Crest Lane

City

Corona

State

CA

Zip Code

92881

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Orange Hills

Occupation

Co-owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 07 / 2013

Transaction ID : C2325423

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

595.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 OF 47

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. David Gifford

Mailing Address 81 Kenyon Ave

City

East Greenwich

State

RI

Zip Code

02818-2905

FEC ID number of contributing
federal political committee.

C

Name of Employer

AHCA/NCAL

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2013

Transaction ID : C2337788

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. James H. Gomez

Mailing Address 2201 K St

City

Sacramento

State

CA

Zip Code

95816-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer

CA Association of Health Facilities

Occupation

CEO/President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 24 / 2013

Transaction ID : C2337684

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Reginald G Hartsfield

Mailing Address 17515 W 9 Mile Rd

City

Southfield

State

MI

Zip Code

48075-4408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advantage Management Group, The Manors

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2013

Transaction ID : C2331611

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Herrick

Mailing Address 33 Elk Street

City
Albany

State
NY

Zip Code
12207

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYS Health Facilities Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 01 / 2013

Transaction ID : C2351568

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Robin L. Hillier

Mailing Address 4433 Pebble Creek Ln

City
Long Grove

State
IL

Zip Code
60047-5283

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Point Rehab and Nursing Center

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 20 / 2013

Transaction ID : C2333565

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Randall Hyatt

Mailing Address 5102 Scenic Dr

City
Yakima

State
WA

Zip Code
98908-2229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hyatt Family Facilities

Occupation

CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2325280

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donna Kelsey

Mailing Address 211 Pomeroy Ave Apt 1207

City	State	Zip Code
Meriden	CT	06450

FEC ID number of contributing federal political committee.

C

Name of Employer

Revera Health Systems

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2013

Transaction ID : C2322515

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jennifer S Knorr HahsMailing Address 900 N Randolph St
Apt 1927

City	State	Zip Code
Arlington	VA	22203-4082

FEC ID number of contributing federal political committee.

C

Name of Employer

American Health Care Association

Occupation

Director, Political Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2013

Transaction ID : C2341139

Amount of Each Receipt this Period

86.96

* Payroll Deduction: \$43.48 Bi-Weekly

Full Name (Last, First, Middle Initial)

C. David A Kylo

Mailing Address 4621 28th Road South

City	State	Zip Code
Arlington	VA	22206

FEC ID number of contributing federal political committee.

C

Name of Employer

National Center for Assisted Living

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2013

Transaction ID : C2341140

Amount of Each Receipt this Period

250.00

* Payroll Deduction: \$125.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶

1336.96

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 47
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. R. Peter Madel Jr.

Mailing Address 108 8th St NW

City

Waseca

State

MN

Zip Code

56093-1912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Shore Inn Nursing Home

Occupation

CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 10 / 2013

Transaction ID : C2327917

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

B. Nitin Mall

Mailing Address 3315 Cross Timbers Rd

City

Flower Mound

State

TX

Zip Code

75028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cross Timbers Rehabilitation & Healthc

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 13 / 2013

Transaction ID : C2329262

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Bethany R Martino

Mailing Address 8559 Window Latch Way

City

Columbia

State

MD

Zip Code

21045

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Health Care Association

Occupation

Vice President, Public Affairs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.16

Date of Receipt

05 / 30 / 2013

Transaction ID : C2341142

Amount of Each Receipt this Period

156.54

* Payroll Deduction: \$78.27 Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

931.54

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory Miller

Mailing Address 11573 Stablewatch Court

City State Zip Code
Cincinnati OH 45249

FEC ID number of contributing
federal political committee.

C

Name of Employer
Health Care Management Group

Occupation
Vice President, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2013

Transaction ID : C2325319

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Richard Miller

Mailing Address 3201 Vista Verde Lane SW

City State Zip Code
Tumwater WA 98512

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington Health Care Association

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322389

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Steve Moore

Mailing Address 2749 East Covenanter

City State Zip Code
Bloomington IN 47401

FEC ID number of contributing
federal political committee.

C

Name of Employer
CarDon & Associates

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 13 / 2013

Transaction ID : C2329258

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dennis Murray

Mailing Address 1049 W. 5th Ave

City

Anchorage

State

AK

Zip Code

99501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heritage Place

Occupation

Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2325276

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Roberts T. Nelson

Mailing Address 3075 E Thousand Oaks Blvd

City

Westlake Village

State

CA

Zip Code

91362-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Chase Group

Occupation

Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 22 / 2013

Transaction ID : C2337388

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

c. Mary Ousley

Mailing Address 101 Bittersweet Drive

City

Richmond

State

KY

Zip Code

40475-8639

FEC ID number of contributing
federal political committee.

C

Name of Employer

PMD Corporation

Occupation

Owner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2350611

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark V Parkinson

Mailing Address 8930 Harvest Square Ct

City

Potomac

State

MD

Zip Code

20854-4475

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Health Care Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

05 / 30 / 2013

Transaction ID : C2341144

Amount of Each Receipt this Period

400.00

* Payroll Deduction: \$200.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Leonard Russ

Mailing Address 40 Keogh Lane

City

New Rochelle

State

NY

Zip Code

10805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayberry Health Care

Occupation

Skilled Nursing Facility Owner & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2325011

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Jesse Samples

Mailing Address 451 Truman Rd

City

Franklin

State

TN

Zip Code

37064-8322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tennessee Health Care Association

Occupation

State Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 02 / 2013

Transaction ID : C2322577

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Shawn Scott

Mailing Address One Medline Place

City State Zip Code
Mundelein IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medline

Occupation

Senior VP HC Corporate Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 20 / 2013

Transaction ID : C2333563

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Gail Sheridan

Mailing Address 20 St. Mark's Bay

City State Zip Code
Faribault MN 55021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tealwood Care Centers

Occupation

Healthcare Mangement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2013

Transaction ID : C2339903

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Jennifer S Shimer

Mailing Address 9507 Shelly Krasnow Ln

City State Zip Code
Fairfax VA 22031-4720

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Health Care Association

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.84

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2013

Transaction ID : C2341150

Amount of Each Receipt this Period

86.96

* Payroll Deduction: \$43.48 Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2836.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elise Smith

Mailing Address 2022 Columbia Rd NW

City

Washington

State

DC

Zip Code

20009-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Health Care Association

Occupation

VP Reimbursement

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 30 / 2013

Transaction ID : C2341151

Amount of Each Receipt this Period

100.00

* Payroll Deduction: \$50.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

B. Steven Wannemacher

Mailing Address PO Box 3188

City

Bloomington

State

IL

Zip Code

61702-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heritage Enterprises

Occupation

President & CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / 06 / 2013

Transaction ID : C2325281

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Paula Warren

Mailing Address 1201 L Street, NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

AHCA/NCAL

Occupation

CIO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 23 / 2013

Transaction ID : C2351569

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

3100.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert Wehner

Mailing Address 5155 North High Street

City State Zip Code
Columbus OH 43214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wesley Glen

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2013

Transaction ID : C2331311

Amount of Each Receipt this Period

138.00

Full Name (Last, First, Middle Initial)

B. Douglas M Wright Jr.

Mailing Address 2844 Traceland Drive

City State Zip Code
Tupelo MS 38803-3667

FEC ID number of contributing
federal political committee.

C

Name of Employer

Community Eldercare Services

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2013

Transaction ID : C2325278

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Michael Wylie

Mailing Address 205 Fairview Road

City State Zip Code
Clarks Green PA 18411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Genesis Healthcare

Occupation

VP Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 20 / 2013

Transaction ID : C2333564

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5388.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Amberwood Court Care Center

Mailing Address 4686 E Asbury Cir

City State Zip Code
 Denver CO 80222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
 05 01 2013

Transaction ID : C2322581

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
 Suite 200

City State Zip Code
 Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 01 2013

Transaction ID : C2326473

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

c. Christopher House

Mailing Address 6270 W 38th Ave

City State Zip Code
 Wheat Ridge CO 80033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
 05 01 2013

Transaction ID : C2322582

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326470

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Colorow

Mailing Address PO Box 710

City State Zip Code
Olathe CO 81425

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322586

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326463

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eagle Ridge, LLC dba Eagle Ridge of Grand Valley

Mailing Address 2425 Teller Ave

City State Zip Code
Grand Junction CO 81501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322587

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326459

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. North Star Community

Mailing Address 3185 W Arkansas Ave

City State Zip Code
Denver CO 80219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322588

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326465

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Pitman Place, LLC dba Westwind Campus

Mailing Address 2515 Pitman Place

City State Zip Code
Pueblo CO 81004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322589

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326475

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pitman Place, LLC dba Westwind Campus

Mailing Address 2515 Pitman Place

City State Zip Code
Pueblo CO 81004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322590

Amount of Each Receipt this Period

250.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326476

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

c. QL Allison Care Center LLC

Mailing Address 1660 Allison Street

City State Zip Code
Lakewood CO 80214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322591

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

562.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326458

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. QL Cambridge Care Center, LLC

Mailing Address 1685 Eaton St

City State Zip Code
Lakewood CO 80214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322592

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326461

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.50

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. QL Lowry Park, LLC

Mailing Address 8505 Lowry Blvd

City

Denver

State

CO

Zip Code

80230

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.50

Date of Receipt

05 / 01 / 2013

Transaction ID : C2322593

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City

Lakewood

State

CO

Zip Code

80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

05 / 01 / 2013

Transaction ID : C2326474

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. QL Harmony Pointe Nursing Center LLC

Mailing Address 1655 Yarrow Street

City

Lakewood

State

CO

Zip Code

80214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.50

Date of Receipt

05 / 01 / 2013

Transaction ID : C2322594

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326456

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. QL Rocky Mountain LLC

Mailing Address 2201 Downing Street

City State Zip Code
Denver CO 80205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322595

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326460

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. QL Uptown Health Care Center LLC

Mailing Address 745 East 18th Avenue

City State Zip Code
 Denver CO 80203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

05 / 01 / 2013

Transaction ID : C2322596

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
 Suite 200

City State Zip Code
 Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

05 / 01 / 2013

Transaction ID : C2326457

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. Sequoia Care Community

Mailing Address 6060 E Iliff Ave

City State Zip Code
 Denver CO 80222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

05 / 01 / 2013

Transaction ID : C2322597

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

625.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326466

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Sierra Healthcare Community

Mailing Address 1432 Depew St

City State Zip Code
Lakewood CO 80214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2322598

Amount of Each Receipt this Period

312.50

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

C. Jay Moskowitz

Mailing Address 12136 West Bayard Avenue
Suite 200

City State Zip Code
Lakewood CO 80228

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Vivage

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4625.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2013

Transaction ID : C2326468

Amount of Each Receipt this Period

312.50

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peachtree Mena, LLC

Mailing Address 1803 Cordie Drive

City

Mena

State

AR

Zip Code

71953

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 13 / 2013

Transaction ID : C2329263

Amount of Each Receipt this Period

1250.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Michael Shepard

Mailing Address 1803 Cordie Dr
PO Box 125

City

Mena

State

AR

Zip Code

71953-9340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shepard Group

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 13 / 2013

Transaction ID : C2329267

Amount of Each Receipt this Period

1250.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

C. 1700 Properties, LLC

Mailing Address P.O. Box 1023

City

Claremore

State

OK

Zip Code

74018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 14 / 2013

Transaction ID : C2337151

Amount of Each Receipt this Period

5000.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brett Lessley

Mailing Address PO Box 1023

City
Claremore

State Zip Code
OK 74018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Griffin Management, Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 14 / 2013

Transaction ID : C2328826

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

*

Full Name (Last, First, Middle Initial)

B. Harmony House LLC

Mailing Address PO Box 829

City
Brewster

State Zip Code
WA 98812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2013

Transaction ID : C2339787

Amount of Each Receipt this Period

250.00

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

c. Jerry R. Tretwold

Mailing Address PO Box 829

City
Brewster

State Zip Code
WA 98812-0829

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harmony House Health Care Center

Occupation
Owner/ Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2013

Transaction ID : C2339788

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

*

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

62438.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO Box 12667

City State Zip Code
 Bakersfield CA 93389

FEC ID number of contributing
federal political committee.

C C00420935

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 13 2013

Transaction ID : C2329259

Amount of Each Receipt this Period

5000.00

Refund of contributions dated 9/6/2011 & 6/18/2012

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 47

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 03 2013
Transaction ID : D146158

Amount of Each Disbursement this Period

52.51

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 06 2013
Transaction ID : D146159

Amount of Each Disbursement this Period

32.29

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 10 2013
Transaction ID : D146160

Amount of Each Disbursement this Period

204.75

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

289.55

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 47

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 20 2013

Transaction ID : D146161

Amount of Each Disbursement this Period

394.54

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 24 2013

Transaction ID : D146162

Amount of Each Disbursement this Period

44.64

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53773

City State Zip Code
Phoenix AZ 85072-3773
Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 28 2013

Transaction ID : D146163

Amount of Each Disbursement this Period

3.94

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

443.12

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Health Care Association Political Action Committee

A. BB&T Merchant Services

Mailing Address PO Box 200

City	State	Zip Code
Wilson	NC	27894-0200

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : D146165

Amount of Each Disbursement this Period



54.40

Full Name (Last, First, Middle Initial)

B. BB&T Merchant Services

Mailing Address PO Box 200

City	State	Zip Code
Wilson	NC	27894-0200

Purpose of Disbursement
Credit Card Processing Fees

[illegible]

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : D146166

Amount of Each Disbursement this Period

610.10

C. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 1099 New York Ave NW
Ste 100

City	State	Zip Code
Washington	DC	20001-4452

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : D146157

Amount of Each Disbursement this Period

342.13

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1006.63

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American Health Care Association Political Action Committee

A. MAJORITY COMMITTEE PAC--MC PAC

Date of Disbursement

Transaction ID : D145787

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

2500.00

B. O'Say Can You See PAC

Date of Disbursement

MM / DD / YYYY

Transaction ID : D145659

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

2500.00

C. PEAK PAC

Date of Disbursement

Transaction ID : D145487

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

6000.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input checked="" type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Health Care Association Political Action Committee

A. KIRKPATRICK FOR ARIZONA

Transaction ID : D145827

Amount of Each Disbursement this Period

Rep. ANN KIRKPATRICK

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

B. CANDICE MILLER FOR CONGRESS

Three digital displays showing the date 05/23/2013 in MM/DD/YYYY format. The first display shows '05' with 'M' labels above. The second shows '23' with 'D' labels above. The third shows '2013' with 'Y' labels above.

Transaction ID : D145826

Amount of Each Disbursement this Period

Rep. Candice S. Miller

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

C. RICHMOND FOR CONGRESS

Transaction ID : D145782

Amount of Each Disbursement this Period

Rep. CEDRIC L. RICHMOND

Category/
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

A horizontal bar with a value of 1000.00. The bar is light gray with a darker gray border. It has a series of small, dark gray rectangular markers along its top and bottom edges, resembling a ruler or a scale. The value "1000.00" is displayed in black text at the right end of the bar.

SUBTOTAL of Disbursements This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. RODNEY ALEXANDER FOR CONGRESS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2013

Mailing Address 319 NANCY'S ROAD

City	State	Zip Code
QUITMAN	LA	71268

Purpose of Disbursement
Contribution

Candidate Name

Rep. Rodney Alexander

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: LA District: 05

Category/
Type**Transaction ID : D145929**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. HOYER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2013

Mailing Address 700 13th Street, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Contribution

Candidate Name

Rep. Steny H. Hoyer

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 05

Category/
Type**Transaction ID : D145930**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PRICE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2013

Mailing Address P.O. Box 425

City	State	Zip Code
Roswell	GA	30077

Purpose of Disbursement
Contribution

Candidate Name

Rep. Thomas Edmunds Price

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District: 06

Category/
Type**Transaction ID : D145491**

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 46 OF 47

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ritz Carlton Hotel, Sarasota

Mailing Address 1111 Ritz Carlton Drive

City Sarasota	State FL	Zip Code 34235
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Purpose of Disbursement
Catering

Candidate Name

Sen. Bill NelsonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2013

Transaction ID : D145928

Amount of Each Disbursement this Period

882.99

* In-Kind

Full Name (Last, First, Middle Initial)

B. BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE	State FL	Zip Code 32935
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Purpose of Disbursement
Contribution

Candidate Name

Sen. Bill NelsonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2013

Transaction ID : D145927

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. ALASKANS FOR BEGICH 2014

Mailing Address PO BOX 410

City PALMER	State AK	Zip Code 99645
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Purpose of Disbursement
Contribution

Candidate Name

Sen. Mark BegichOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AK District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2013

Transaction ID : D145488

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8382.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAT ROBERTS FOR US SENATE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2013

Mailing Address PO BOX 433

City	State	Zip Code
GREAT BEND	KS	67530

Transaction ID : D145781Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

Sen. PAT ROBERTSCategory/
Type

2500.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KS District:

Full Name (Last, First, Middle Initial)

B. WYDEN FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2013

Mailing Address 232 NE 9TH AVENUE

City	State	Zip Code
PORTLAND	OR	97232

Transaction ID : D145658Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

Sen. RONALD LEE WYDENCategory/
Type

2500.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OR District:

Full Name (Last, First, Middle Initial)

C. Turquoise PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2013

Mailing Address 1050 17th St NW
Suite 590

City	State	Zip Code
Washington	DC	20036

Transaction ID : D145490Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

65382.99
